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Daines Leads Bipartisan Effort Urging VA Officials to Allow Discussion of Medical Marijuana with Patients Where it is Legal

WASHINGTON, D.C. — Senator Steve Daines today urged the U.S. Department of Veterans Affairs (VA) to change its current policy to allow VA doctors to discuss and recommend marijuana as a treatment option in states where medical marijuana has been legalized, like Montana.

Daines led a bipartisan group of 21 Senators and Representatives in sending a letter to VA Secretary Bob McDonald urging the VA to permit doctors to discuss and recommend marijuana as a treatment option in states where it's legal. Under the current system, VA doctors are not allowed to give recommendations for patients to receive medical marijuana, even in states that have legalized it.

"According to the current directive, VA providers are prohibited from completing forms seeking recommendations or opinions regarding a veteran's participation in a state-sanctioned marijuana program. This policy disincentivizes doctors and patients from being honest with each other," the Daines and his colleagues wrote. **"Congress has taken initial steps to alleviate this conflict in law and we will continue to work toward this goal. However, you are in a position to make this change when the current VHA directive expires at the end of this month. We ask that you act to ensure that our veterans' access to care is not compromised and that doctors and patients are allowed to have honest discussions about treatment options."**

The letter was also signed by U.S. Senators Kirsten Gillibrand (D-NY) and Jeff Merkley (D-OR), Cory Booker (D-NJ), Barbara Boxer (D-CA), Patty Murray (D-WA), Brian Schatz (D-HI), Tammy Baldwin (D-WI), Michael Bennet (D-CO), Ron Wyden (D-OR) and Elizabeth Warren (D-MA), and U.S. Representatives Earl

Blumenauer (D-OR), Dina Titus (D-NV), Joe Heck (R-NV), Sam Farr (D-CA), Jared Polis (D-CO), Chellie Pingree (D-ME), Steve Cohen (D-TN), Justin Amash (R-MI), and Mark Pocan (D-WI).

Last year, Daines introduced an amendment to the 2016 Military Construction-Veterans Affairs appropriations bill that would have allowed VA physicians to discuss medical marijuana treatment with, and make necessary recommendations for their patients, in accordance with state law. Daines' amendment passed the Senate Committee on Appropriations on a bipartisan vote and would allow for parity between VA and non-VA facilities in states like Montana, which have medical marijuana programs. It does not change current laws preventing the possession or dispensing of marijuana on VA property, but simply allows veterans to discuss all options that are legally available in their state with their VA doctor.

Daines' letter is available below:

Dear Secretary McDonald,

We write today to bring your attention to recent Congressional efforts to improve the relationship between Department of Veterans Affairs (VA) doctors and their patients, with respect to medicinal use of cannabis, also known as marijuana. We understand that VHA Directive 2011-004, regarding "access to clinical programs for veterans participating in state-approved marijuana programs" will expire on January 31, 2016. We ask that, upon the directive's expiration, any new directive remove barriers that would interfere with the doctor-patient relationship in states that have chosen to legalize marijuana for medical purposes.

According to the current directive, VA providers are prohibited from completing forms seeking recommendations or opinions regarding a veteran's participation in a state-sanctioned marijuana program. This policy disincentivizes doctors and patients from being honest with each other. Since many medical marijuana states require that a doctor fill out a form certifying that a patient is suffering from a qualifying condition in order to allow them to gain access to medical marijuana through state-regulated dispensaries, this policy only encourages those VA patients who are seeking treatment to go outside of the VA system and seek a recommendation from a physician likely far less familiar with their symptoms and medical history. It is not in the

veterans' best interest for the VA to interfere with the doctor-patient relationship. It is important for veterans to be able to discuss all treatment options with their VA physicians and for their physicians to be aware of all drugs they are taking.

Since the issuance of the VHA Directive 2011-004 in 2011, there has been a sea change in the legal framework surrounding marijuana in the United States. Currently, 23 states and the District of Columbia have legalized medical marijuana, and another 17 states allow the use of CBD, one of the active compounds found in marijuana, for therapeutic uses. Recognizing this, Congress has begun to act. Earlier this year, the Senate Committee on Appropriations approved an amendment to the 2016 Military Construction-Veterans Affairs appropriations bill that would have allowed VA physicians to discuss medical marijuana treatment with, and make necessary recommendations for their patients, in accordance with state law. The amendment also explicitly prevented VA from taking any action that would interfere with a veteran's ability to participate in a State-approved medicinal marijuana program or deny any services to a veteran participating in such a program, including losing access to prescription drugs. The final bill, including the amendment, passed the Senate on November 10 with a vote of 93-0. Bipartisan companion legislation—the Veterans Equal Access Act—has also been introduced in the House.

We have worked to ensure that our veterans have the care they have earned and deserve. That means allowing veterans to have full and frank discussions with their doctors without the fear of losing benefits. It also means allowing VA doctors to provide opinions and recommendations to their patients in states where medical marijuana is legal. Congress has taken initial steps to alleviate this conflict in law and we will continue to work toward this goal. However, you are in a position to make this change when the current VHA directive expires at the end of this month. We ask that you act to ensure that our veterans' access to care is not compromised and that doctors and patients are allowed to have honest discussions about treatment options. We look forward to your prompt attention to this issue.

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